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# UTILITY PATENT APPLICATION TRANSMITTAL

(Only for new nonapplications under 37C.F.R. §1.53(b))

Attorney Docket No. **PC10332C**First Inventor **Eric B. Grossman**Title **TREATMENT OF NEUROPATHY**Express Mail Label No. **EV271823717US**USPTO  
10/7/31905

22278

**APPLICATION ELEMENTS**

See MPEP chapter 600 concerning utility patent application contents.

ADDRESS TO:  
Mail Stop Patent Application  
Commissioner for Patents  
Box 1450  
Alexandria, VA 22313-1450

1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g., PTO/SB/17) <i>(Submit an original, and a duplicate for fee processing)</i>	7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or computer Program (Appendix)
2. <input type="checkbox"/> Applicant claims small entity status See 37 CFR 1.27	8. <input type="checkbox"/> Nucleotide and/or Amino Acid Sequence Submission <i>(if applicable, all necessary)</i>
3. <input checked="" type="checkbox"/> Specification (COPY) [Total Pages <u>34</u> ] <i>(preferred arrangement set forth below)</i> <ul style="list-style-type: none"> <li>- Descriptive title of the Invention</li> <li>- Cross References to Related Applications</li> <li>- Statement Regarding Fed sponsored R&amp;D</li> <li>- Reference to sequence listing, a table, or a computer program listing appendix</li> <li>- Background of the Invention</li> <li>- Brief Summary of the Invention</li> <li>- Brief Description of the Drawings <i>(if filed)</i></li> <li>- Detailed Description</li> <li>- Claim(s)</li> <li>- Abstract of the Disclosure</li> </ul>	9. <input type="checkbox"/> Computer Readable Copy (CRF)
4. <input type="checkbox"/> Drawing(s) (35 U.S.C. 113) [Total sheets <u>—</u> ]	10. <input type="checkbox"/> Specification Sequence Listing on: <ul style="list-style-type: none"> <li>i. <input type="checkbox"/> CD-ROM or CD-R (2 copies)</li> <li>ii. <input type="checkbox"/> Paper</li> </ul>
5. <input checked="" type="checkbox"/> Oath or Declaration [Total pages <u>3</u> ] a. <input type="checkbox"/> Newly executed (original or copy)	11. <input type="checkbox"/> Statement verifying identity of above copies
b. <input checked="" type="checkbox"/> Copy from a prior application (37 CFR §1.63(d)) <i>(for continuation/divisional with Box 18 completed)</i>	12. <input type="checkbox"/> English Translation Document <i>(if applicable)</i>
i. <input type="checkbox"/> <b>DELETION OF INVENTOR(S)</b> Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).	13. <input checked="" type="checkbox"/> Assignment Papers (cover sheet & document(s))
6. <input checked="" type="checkbox"/> Application Data Sheet. See 37 CFR 1.76	14. <input checked="" type="checkbox"/> 37 CFR 3.73(b) Statement <i>(when there is an assignee)</i>
18. If a <b>CONTINUING APPLICATION</b> , check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37CFR 1.76.	15. <input type="checkbox"/> Power of Attorney (COPY)
<input checked="" type="checkbox"/> Continuation <input type="checkbox"/> Divisional <input type="checkbox"/> Continuation-in-part (CIP)	16. <input type="checkbox"/> English Translation Document <i>(if applicable)</i>
	17. <input type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449
	18. <input type="checkbox"/> Copies of IDS Citations
	19. <input checked="" type="checkbox"/> Preliminary Amendment
	20. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) <i>(Should be specifically itemized)</i>
	21. <input type="checkbox"/> Certified Copy of Priority Document(s) <i>(if foreign priority is claimed)</i>
	22. <input type="checkbox"/> Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.
	23. <input type="checkbox"/> Other: _____

**ACCOMPANYING APPLICATION PARTS**

9. <input type="checkbox"/> 37 CFR 3.73(b) Statement <i>(when there is an assignee)</i>	10. <input type="checkbox"/> Power of Attorney (COPY)
11. <input type="checkbox"/> English Translation Document <i>(if applicable)</i>	12. <input type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449
13. <input checked="" type="checkbox"/> Assignment Papers (cover sheet & document(s))	14. <input checked="" type="checkbox"/> English Translation Document <i>(if applicable)</i>
15. <input type="checkbox"/> Preliminary Amendment	16. <input type="checkbox"/> Copies of IDS Citations
16. <input type="checkbox"/> Return Receipt Postcard (MPEP 503) <i>(Should be specifically itemized)</i>	17. <input type="checkbox"/> Certified Copy of Priority Document(s) <i>(if foreign priority is claimed)</i>
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18. <input type="checkbox"/> Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.	19. <input type="checkbox"/> Other: _____

18. If a **CONTINUING APPLICATION**, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37CFR 1.76. Continuation  Divisional  Continuation-in-part (CIP) of prior application No. 10/206,615Prior application information: Examiner Raymond J Henley III Group/Art Unit: 1614For **CONTINUATION OR DIVISIONAL APPS** only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts**19. CORRESPONDENCE ADDRESS**

<input checked="" type="checkbox"/> Customer Number	<u>28523</u>	<input type="checkbox"/> Correspondence address below
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Name			
Address			
City	State	Zip Code	
Country	Telephone	Fax	

NAME (Print/type)	<u>A. Dean Olson</u>	Registration No. (Attorney/Agent)	<u>31,185</u>
Signature			

This collection of information is required by 37 CFR 1.53(b). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Mail Stop Patent Application, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

# FEE TRANSMITTAL for FY 2004

Effective 10/01/2003. Patent fees are subject to annual revision.

Applicant claims small status. See 37 CFR 1.27

**Total Amount of Payment \$3,038.00**

## METHOD OF PAYMENT (check all that apply)

Check  Credit Card  Money  Other  None  
Order

Deposit Account:

Deposit Account Number	16-1445
Deposit Account Name	Pfizer Inc

The Director is authorized to: (check all that apply)

Charge fee(s) indicated below  Credit any overpayments  
 Charge any additional fee(s) or any underpayment of fee(s)

Charge fee(s) indicated below, except for the filing fee  
to the above-identified deposit account.

## FEE CALCULATION

### 1. BASIC FILING FEE

#### Large Entity Small Entity

Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description	Fee Paid
1001	770	2001	385	Utility filing fee	770
1002	340	2002	170	Design filing fee	
1003	530	2203	265	Plant filing fee	
1004	770	2004	385	Reissue filing fee	
1005	160	2005	80	filng fee	
Subtotal (1)s				\$ 770	

### 2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE

Extra Claims	Fee from below	Fee Paid
4 - 20** = 0	x 18	= 0.00
26 - 3 = 23	x 86	= 1,978.
	290	= 290.00

#### Large Entity Small Entity

Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description
1202	18	2202	9	Claims in excess of 20
1201	86	2201	43	Independent claims in excess of 3
1203	290	2203	145	Multiple dependent claim, if not paid
1204	86	2204	43	**Reissue independent claims over original patent
1205	18	2205	9	**Reissue independent claims over original patent
(\$)				2,268.

\*\*or number previously paid, if greater; For Reissues, see above

Complete if Known	
Application Number	To be assigned
Filing Date	Concurrently Herewith
First Named Inventor	Eric B. Grossman
Examiner Name	To be assigned
Art Unit	To be assigned
PC#	PC10332C

## FEE CALCULATION (continued)

Large Entity	Small Entity	Fee Description	Fee Paid
1051	130	2051 65 Surcharge – late fee or oath	
1052	50	2052 25 Surcharge—late filing fee or cover sheet	
1053	130	1053 130 Non-English specification	
1812	2,520	1812 2,520 For filing a request for Ex Parte reexamination	
1804	920*	1804 920* Requesting publication of SIR prior to Examiner action	
1805	1,840*	1805 1,840* Requesting publication of SIR after Examiner action	
1251	110	2251 55 Extension for reply within first month	
1252	420	2252 210 Extension for reply within second month	
1253	950	2253 475 Extension for reply within third month	
1254	1,480	2254 740 Extension for reply within fourth month	
1255	2,010	2255 1,005 Extension for reply within fifth month	
1401	330	2401 165 Notice of Appeal	
1402	330	2402 165 Filing a brief in support of an appeal	
1403	290	2403 145 Request for oral hearing	
1451	1,510	1451 1,510 Petition to institute a public use proceeding	
1452	110	2452 55 Petition to revive unavoidable	
1453	1,330	2453 665 Petition to revive – unintentional	
1501	1,330	2501 665 Utility issue fee (or reissue)	
1502	480	2502 240 Design issue fee	
1503	640	2503 320 Plant issue fee	
1460	130	1460 130 Petitions to the Commissioner	
1807	50	1807 50 Processing fee under 37 CFR 1.17(q)	
1806	180	1806 180 Submission of Information Disclosure Stmt	
8021	40	8021 40 Recording each patent assignment per property (times number of properties)	
1809	770	2809 385 Filing a submission after final rejection (37 CFR 1.129(a))	
1810	770	2810 385 For each additional invention to be examined (37 CFR 1.129(b))	
1801	770	2801 385 Request for Continued Examination (RCE)	
1802	900	1802 900 Request for expedited examination of a design application	
Other Fee (specify) _____			

\*Reduced by Basic Filing Fee Paid Subtotal (3) (\$)

SUBMITTED BY		(Complete if applicable)		
Name (Printed/Type)	A. Dean Olson	Registration No.	31,185	Telephone 860-441-4904
Signature				12/10/2003

Warning: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

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